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APPLICANTS

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** CONTINUING DATA *****

None, Mc

** FOREIGN APPLICATIONS *****

None, Mc

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/07/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY WA	SHEETS DRAWING 8	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>Hammad Butt</i> Initials: <i>Mc</i>				

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TITLE

Scalability test and analysis

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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☐ 1.18 Fees (Issue)☐ Other _____☐ Credit